



**Colorado Department of Public Health and Environment  
Air Pollution Control Division  
Air Monitoring Specialist Candidate  
On-The-Job Experience Form**

Submit form to:  
Colorado Dept. of Public Health and  
Environment  
APCD-SS-B1  
4300 Cherry Creek Drive South  
Denver, CO 80246-1530  
Phone: 303-692-3100

**CANDIDATE**

**OBSERVING/SUPERVISING AMS**

Name		Name	
Address		Address	
City/State/Zip		City/State/Zip	
SSN		AMS Cert. #	
Phone		Phone	

**A. 2 to 10 final visual clearances performed under the direct observation of the state-certified AMS:**

Permit Number/Contractor	Date of Visual Clearances	Material and Quantities Abated	AMS Initials
1.			
2.			
3.			
4.			
5.			

Please attach additional sheets for documentation as necessary.

**B. 2 to 10 final air clearances performed under the direct observation of the state-certified AMS:**

Permit Number/Contractor	Date of Final Air Clearances	Material and Quantities Abated	AMS Initials
1.			
2.			
3.			
4.			
5.			

Please attach additional sheets for documentation as necessary.

**C. 80 to 400 hours of ambient/MAAL asbestos air monitoring performed under the direct supervision of the state-certified AMS:**

Permit Number/Contractor	Hours/Type of Air Monitoring	Material and Quantities Abated	AMS Initials
1.			
2.			
3.			
4.			
5.			

Please attach additional sheets for documentation as necessary.

<b>Candidate:</b> <i>I certify that I have performed the above requirements for on-the-job experience.</i>		<b>Observing/Supervising AMS:</b> <i>The candidate has satisfactorily met the above requirements for on-the-job experience.</i>	
Signature	Date	Signature	Date

<b>FOR APCD USE ONLY</b>	
Date Received:	
Approved By:	